PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/689991

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN	
TC	TAL CLAIMS				1			RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMB	IBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	24 minus 20=		• 4			X\$ 9=		OR	X\$18=	77
IND	EPENDENT CL	AIMS	minus 3 = 3			1		X40=		OR	X80=	2/10
MULTIPLE DEPENDENT CLAIM PRESENT								+135=			+270=	267 ()
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR OR	TOTAL	1022-
CLAIMS AS AMENDED - PART II								IOIAL	L	Un	OTHER	1
(Column 1) (Column 2) (Column						(Column 3)	<u>)</u> , ,	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
SE CR	Total	. 24	Minus	<u> 2</u>	4	=		X\$ 9=		OR	X\$18=	
AME	Independent	. 6	Minus	***	6			X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							l	TOTAL ADDIT. FEE			TOTAL ADDIT, FEE	
		(Column 1)		(Colur		(Column 3		ADDI1. FEE (NDD11.1 CC	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	ya.	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 1	Minus	" o	24	=		X\$ 9=		OR	X\$18=	
AME	Independent	·	Minus	***	6	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEPI	ENDENT	CLAIM	<u> </u>		+135=		OR	+270=	
								TOTAL			TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	9	HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	. 7	Minus	• 6	24	=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	6	= —		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT FEE								OR	+270= TOTAL			
***	If the "Highest Nu	mber Previously F	aid For IN THIS	SPACE	is less tha	ın 3, enter "3."	'	ADDIT. FEE	propriate bo	OR x in co	ADDIT. FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

CLAIMS AS FILED - PART I							SMALL	ENTITY		OTHER	THAN
(Column 1) (Column 2)							TYPE		OR	SMALL	ENTITY
FOR		NUM	BER FILED	NUMBER	REXTRA	ſ	RATE	FEE	1	RATE	FEE
BA	SIC FEE		·						OR		
TC	TAL CLAIMS	(24 minus	20= *	*				OR		
INC	EPENDENT C	AIMS	(₀ minus	3 = *		-			1		
MULTIPLE DEPENDENT CLAIM PRESENT									OR		
+ If the difference is column 4 is locally									OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							CHALL	PAITTA.	OTHER THAN SMALL ENTITY		
		(Column 1 CLAIMS	<u> </u>	(Column 2) HIGHEST	(Column 3)		SMALL		OR 1	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 20	Minus	·· 24	= =				OR		- B Control Control
	Independent	* 3	Minus	***	= -	-					
0	FIRST PRESE	NTATION OF	MULTIPLE DE	PENDENT CLAI	М	-			OR		
					•				OR		
		•				— А	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	(Column 2)	(Column 3)				•		
AMENDMENT B	* ·	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT			ADDI-			ADDI-
		AFTER AMENDMEN	τ	PREVIOUSLY PAID FOR	EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**	E				OR		
	Independent	*	Minus	***	=						
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR		
									OR		
TOTAL ADDIT. FEE OF								OR	TOTAL ADDIT. FEE		
		(Column 1)	(Column 2)	(Column 3)	1					
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	= .				0.0		1 lelie
	Independent	* '	Minus	***	=	-		· ·	OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR		
							×		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											